

PROVINCIAL NEWS

SASKATCHEWAN

The Local Government Continuing Committee established by the Government of Saskatchewan has brought in its 180-page report.

Several references to the probability of a provincial medical insurance plan underlined the potential importance of county government or regional government in the administration of a medical care program.

The Committee in its final report to the provincial government said that the regional unit of local government is the best qualified place for organizing local responsibilities and would permit close co-ordination of medical and hospital services.

The report further stated that local participation in any universal medical care program is ultimately important to the efficiency and effectiveness of the service.

The report said that the province was responsible for guaranteeing access to medical care and for seeing that the burden of cost is spread evenly.

"However, a basic program could be supplemented by additional services based on local desires. Local effort in attracting doctors may well be important to fulfilling the concept of 'equal' services."

"Local authorities would be in a strategic position to assess problem situations and to check over-utilization of services," the report stated.

The Committee said that provision of medical care on a small area basis, such as a rural municipality or even a county, would not provide the specialized medical services necessary to a good medical care plan. These must be paid for by a larger area, which can afford to provide them.

Reorganization of local government should provide integration of related services, such as health and welfare, which would be important to a medical care plan.

"Welfare treatment may even offer an alternative to health treatment. For example, the fundamental treatment of nutritional deficiency (a health problem) may call for augmenting the patient's income (welfare)."

"At the local level, at least, there are strong reasons for proving the best framework for close co-ordination of health and welfare services," the committee said.

The Provincial Department of Public Health has announced the establishment of the Saskatoon Rural Health Region, the last health region remaining to be organized in Saskatchewan. The proposed Health Region will include 9 towns, 26 villages and 22 rural municipalities with a population of 38,000. The city of Saskatoon will not be included.

Prince Albert is the site of the first mass immunization program in Canada with the Sabin oral poliomyelitis vaccine. The entire population of 22,000 people was offered the vaccine in a three-day blitz during the month of February.

The project was endorsed by the Prince Albert and District Medical Society, the Provincial Department of Public Health, the regional Board of Health of Prince Albert and the Prince Albert city Council.

This demonstration in Prince Albert is part of an effort by the Department of National Health and Welfare, its National Technical Advisory Committee on Live Polio Vaccine and the Provincial Health Departments to estimate the effectiveness of the new vaccine. Prince Albert was chosen because of its size and its record of a relatively high incidence of paralytic poliomyelitis in the city and surrounding area last year.

During March, Dr. Louis R. Orkin, Professor and Chairman, Department of Anesthesiology, Albert Einstein College of Medicine, Yeshiva University, New York, spoke on "Poisonings and Their Treatments" at the University Hospital.

G. W. PEACOCK

MANITOBA

The annual report of Dr. S. L. Carey, Chief of Medical Services, Clearwater Lake Hospital, in northern Manitoba, shows that the time for complacency in the tuberculosis case-finding program has not yet arrived. Active nests of tuberculosis were discovered in three small communities, but not until one infant had developed meningitis and another far advanced miliary tuberculosis. The adult sources of infection had advanced open bacillary tuberculosis. A highly infectious elderly male had evaded x-ray examination for 74 years. A local epidemic of tuberculosis in the Baker Lake area of the Central Arctic resulted in the hospitalization of 10 active cases—all this in spite of regular organized x-ray surveys!

Johanna and Lana Nightingale, 12-year-old identical twins, and their mother, of Steinbach, arrived at Winnipeg Airport on February 27, after a stay of over two months in the Peter Bent Brigham Hospital, Boston. They are the youngest twins to undergo a kidney transplant operation. Johanna suffered from a kidney infection which would have proved fatal, but the Canadian Legion, the Women's Institute, the Red Cross and the Kinsmen Club of Steinbach provided the necessary funds for the operation. In a five-hour procedure on December 28, a healthy kidney from Lana was transplanted. After it was ascertained that the transplanted kidney was functioning properly, Johanna's diseased kidneys were removed. The arrival of the three and their reunion with the father and three other children was shown on television. Johanna has gained 13 lb. since her operation and says that she can eat salt and peanuts again. It was a happy ending to a new and dangerous operation.

Dr. Richard A. Lim, a specialist in general and thoracic surgery, and Dr. Patricia A. Hutchinson, a pediatrician, have joined the staff of the St. Boniface Clinic.

ROSS MITCHELL

ONTARIO

An Ottawa business firm has renewed a \$1500 medical research fund established last year at the University of Ottawa.

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Betram Loeb, president of M. Loeb, Limited, founded the Dr. Henry H. Loeb Medical Research Fund last year with an initial \$1500 to commemorate a brother who died in May 1949. Another brother, Dr. Lazarus Loeb, is a member of the University's medical faculty.

The fund is distributed at the discretion of the Dean, Dr. J. Jacques Lussier. Last year it was used for stop-gap purposes — including financial support for short periods for research workers not yet engaged in formal research programs, for special technical purposes related to research, and for the purchase of research equipment not budgeted for either in the Faculty or in other research budgets.

NEW BRUNSWICK

Dr. H. S. Wright, prominent Fredericton physician and surgeon with many years of experience in municipal affairs, voluntary health and welfare agencies and military medical services, has been named director of New Brunswick's emergency health services under the province's civil defence program. His appointment has been announced jointly by the Hon. Georges L. Dumont, M.D., Minister of Health, and the Hon. Joseph E. LeBlanc, Minister of Municipal Affairs. The latter is responsible for provincial civil defence.

Dr. Wright will head the planning and organizing of emergency health services in the province. This will entail organization and liaison with doctors, nurses and hospitals, as well as municipalities or areas organized for civil defence. Also he will be responsible for establishing and maintaining close liaison with the federal emergency health services, as well as the Canadian Red Cross and St. John Ambulance.

Dr. Wright will co-ordinate emergency hospital services in the province and the setting up of advance treatment centres. He will be required to have a knowledge of medical supplies and stores in the province, with particular reference to the stockpile of medical stores now being acquired by the federal emergency health services for distribution to the provinces.

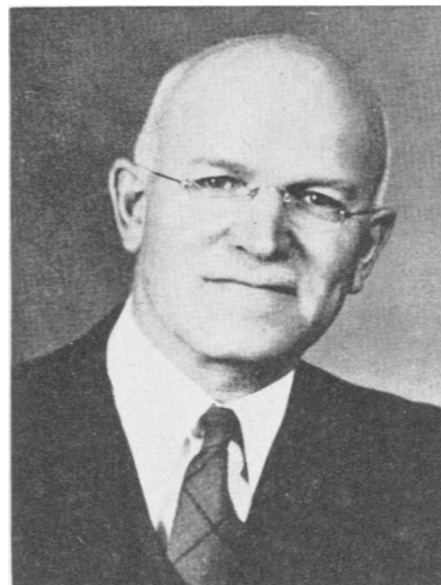
The new director received his medical degree from McGill University in 1918 and practised at Lakeville, Carleton County, from 1919 to 1925 and in Fredericton from 1925 to January 1960, when he retired from active medical practice.

He served in the Canadian Army from 1914 to 1917, going overseas in 1915 as a private in the Medical Corps and returning to Canada in 1917 as an infantry lieutenant, after serving in England and France. He transferred back into the Canadian Army Medical Corps (Militia) upon his graduation from university and was placed on the retired list as major in 1937. During the Second World War, Dr. Wright was civilian surgical consultant to the Fredericton Military Hospital.

With the exception of two terms, Dr. Wright was a member of the Fredericton City Council from 1934 to 1957, first as an alderman and during the last eight years as mayor. He is a past president of the Union of New Brunswick Municipalities, and has served on the executive of the Canadian Federation of Mayors and Municipalities.

He was appointed to the Medical Council of New Brunswick in 1939 and served on that body until 1959, including two one-year terms as president.

Dr. Wright took an active part in organizing the first Fredericton Area United Appeal conducted in 1960 and he is president of the first board of directors of that organization.



Dr. H. S. Wright

He has been an instructor in first aid for St. John Ambulance and was honoured by being appointed Serving Brother of the Venerable Order of St. John of Jerusalem. He served on the Fredericton board of the Victorian Order of Nurses for many years, including several as president.

Members of the Restigouche County branch of the New Brunswick Medical Association and their wives attended a dinner recently at Cedar Lodge Motel to honour Dr. J. H. M. Rice, who had completed 25 years of medical practice in that community. The board presented Dr. Rice with a watch and Mrs. Rice was presented with a bouquet of roses.

Dr. Benedict Pothier of Dalhousie, president of the branch, presided. Dr. Pothier called on Dr. W. W. Fleck of Dalhousie, who recalled the 25 years of devoted medical service rendered by Dr. Rice in that community. He spoke of his service to the medical profession in the wider field, noting that he was a past president of the New Brunswick Medical Association, the first chairman of the College of General Practice for New Brunswick and the medical representative for the New Brunswick Medical Association on the Maritime Hospital Service Association. He also noted that Dr. Rice was active in all phases of community life.

Dr. Rice, in his reply, thanked the members for their kindness in honouring him on the occasion of his 25th anniversary. He spoke of the many changes that had taken place in the practice of medicine in the last 25 years. He took the French members of the branch by surprise by thanking them in French.

A. W. Ross